



LWR™ | FAMILY OF
COMPANIES



2023

Benefits Guide

Being ranked the Best Place to Work starts with great benefits.

Welcome to your 2023 Lower Benefits! As part of our commitment to you, we offer competitive benefits like medical, dental, vision and life insurance, all outlined in this booklet.

If you're a new-hire, benefits become effective the first day of the first month following your hire date. If you choose not to enroll at that time, you will not be eligible again until the next open enrollment period, or if you experience a qualifying life change event like marriage, birth or loss of other coverage.

This booklet is intended as only a summary of benefits. For complete plan information, please see details in the HR Library on Jostle.

There are 3 types of benefits at Lower:



Selected

Medical
Dental
Vision
Voluntary Life
Short Term Disability
Family Medical Reimbursement
Health Savings Account, Flexible Spending Accounts



Automatic

Basic Life
AD&D
Long Term Disability
Employee Assistance



Future

401(k)-after three full months of employment
Parental Leave



401(k) Overview

In order to assist our associates in saving for retirement, we provide a 401(k) program to which associates can contribute funds and also earn employer contributions.

Full-time associates are eligible to enroll in their 401(k) benefits after three full months of employment. If you start, say, January 12, you will then be eligible May 1. You are automatically enrolled to defer 3% of your pay as of the date you become a participant in the plan, unless you choose a different percentage or choose not to defer. If you do not choose a different percentage (including zero), the percentage will be automatically increased each year on January 1st by 1% up to a maximum percentage of 10%. To view or make changes to your profile, you can register for an account by visiting www.principal.com.

Associates can contribute up to 90% of their salary. Lower matches 25% of the first 3% contributed, which becomes fully vested after six years of employment.

If you would like to rollover an existing 401(k), you can do so by creating an account with our 401(k) servicer, Principal, at www.principal.com/enroll. After your account is set up, go to Rollovers > Start Your Rollover. If you have any questions, you can call Principal customer service at 1-800-547-7754.

Know your medical plan choices.

You have three medical coverage options to choose from: The HSA, PPO, and Family MERP. Provided by Cigna.



HSA

Health Savings Account Plan

This plan comes with a Health Savings Account (HSA), allowing you to contribute tax free money each paycheck for healthcare needs now and in the future. Funds can be used for medical, dental, and vision expenses. The HSA is a bank account, which means the money rolls over and is yours to keep.

PPO

Preferred Provider Organization Plan

With this plan, you pay copays for doctors' visits, while other medical services require a deductible before coinsurance begins. When enrolled in the PPO Plan, you are not eligible to enroll in a Health Savings Account. This plan has a lower deductible than the other two plans, but higher per paycheck premiums.

MERP

Medical Expense Reimbursement Plan

With this plan, associates currently enrolled with Lower who have the ability to enroll in coverage elsewhere, have an opportunity to receive 100% coverage. Check out page 9 to learn all about the Family MERP!

Not sure which plan is best for you? Call Cigna One Guide Pre-Enrollment Line 1-800-564-7642.

Compare the Plans

Cost Per Paycheck	HSA Plan	PPO Plan
Associate	FREE	\$123.44
Associate + Spouse/Domestic Partner	\$130.41	\$329.38
Associate + Child(ren)	\$94.75	\$300.26
Family	\$184.97	\$507.60

Annual Deductible	In-network	Out-of-network	In-network	Out-of-network
Associate	\$3,000	\$6,000	\$1,750	\$4,500
Associate + Spouse/Domestic Partner or Child(ren)	\$6,000	\$12,000	\$3,500	\$9,000
Family	\$6,000	\$12,000	\$3,500	\$9,000
Out-of-Pocket Maximum** (This includes your deductible, copays, and coinsurance for medical and prescriptions.)	In-network	Out-of-network	In-network	Out-of-network
Associate	\$4,250	\$8,500	\$3,750	\$10,500
Associate + Spouse/Domestic Partner or Child(ren)	\$8,500	\$17,000	\$7,500	\$21,000
Family	\$8,500	\$17,000	\$7,500	\$21,000
Copays and Coinsurance	In-network	Out-of-network	In-network	Out-of-network
Preventive Care	100%	50%*	100%	50%*
Primary Care Office Visit	80%	50%*	\$25 copay	30%*
Specialist Office Visit	80%	50%*	\$50 copay	30%
Urgent Care	80%	50%*	\$25 copay	30%
Emergency Room	80%	80%	\$400 copay (waived if admitted)	\$400 copay (waived if admitted)
Hospitalization	80%	50%*	80%	50%*
Telemedicine Visit - Medical(via MD Live)	\$55 copay until deductible is met, then covered by company.	N/A	100% Covered by Company	N/A
Pharmacy	\$15/\$50/\$75/30%	N/A	\$15/\$50/\$75/30%	N/A
Most Other Services	80%	50%*	80%	50%*

*Maximum Reimbursable Charge (MRC) applies to out-of-network charges for non-emergency services. When you receive out-of-network non-emergency medical care from a non-participating doctor or other healthcare professional, there's a limit to the amount of money that will be reimbursed.

**The HSA and PPO Plans include an individual out-of-pocket maximum within the family tiers. This means that for all tiers other than Associate Only, when any one individual family member reaches \$8,000 for in-network claims, the Plan pays for any claims over that amount for that individual family member. Once the total out-of-pocket maximum is met, then the Plan will pay 100% of claims for all family members. All coinsurance and co-pays on HSA plan are subject to first meeting the deductible.

Note: If you are enrolled in an HSA Plan, your out-of-network claims apply to your in-network deductible and out-of-pocket maximums. If you are enrolled in the PPO Plan, copays do not apply toward your deductible, but do apply toward your out-of-pocket maximum.

LET'S DIVE DEEPER...

Health Savings Account Provided by BMO Harris

What is an HSA?

This is a tax-free savings account that can be used to pay for medical, dental, and vision expenses for you and your qualified dependents.

How is my HSA funded?

Your account is funded by you each paycheck. You set your contributions and you will see this be deposited into your account.

How do I use these funds?

You will receive a debit card from BMO Harris that you will use just like a typical bank card.

Do I have to use these funds by a specific date?

Nope! These funds will continue rolling over each year until they are needed.

What You Can Contribute to Your HSA

The amount of your contributions cannot exceed the 2022 IRS annual limits.*

Associate-Only Coverage	\$3,850
Associate + One or More Dependents	\$7,750
Catch-up Contributions (Age 55 and Over)	Additional \$1,000 per year



HIGHLIGHTS OF THE

Health Savings Account



Save

If you don't use all your HSA dollars for in a given year, that money rolls over, giving you healthcare savings for medical costs in the future, even in retirement.

When combined with a 401(k) account, you can build a nice, well-rounded savings outlook for the future.



Choose

You decide when you want to use the money in your HSA. You can always choose to pay out-of-pocket for medical services if you want to save your HSA money for the future. The money in the account is yours to keep, even if you change medical plans, retire, or leave the company.



Invest

When your balance exceeds \$1,000, you can grow your account by investing your funds that earn non-taxable returns.



Manage

You can change the amount of your contribution throughout the year as long as it doesn't exceed the annual IRS limits on page 6.



EXPLORE

Healthcare & Dependent Care FSAs

Healthcare FSAs (Flexible Spending Accounts) are optional accounts you can enroll in and are a great way to save money throughout the year to help offset your deductible. They lower your taxable income by letting you save money before taxes to pay for eligible healthcare expenses.



Plan Details	Healthcare FSA	Dependent Care FSAs
Works with these Medical Plans	PPO Plan or Family MERP	PPO, HSA, or Family MERP
Your Contribution	Up to \$3,050*	Up to \$5,000
Funds can be used for	Medical, dental, and vision expenses incurred by you and your eligible tax dependents. Full funds are available as of the day your benefits become active.	Funds are available as deducted from semi-monthly payroll and deposited into your Dependent Care FSA.
Limitations?	Cannot be used when enrolled in High Deductible Plan.	Childcare expense for dependents up to the age of 13 only. Married associates contributing to an FSA have a combined maximum of \$5000.
Rollover Options	<ul style="list-style-type: none">• Roll over up to \$610 to the next plan year• Anything over \$610 is forfeited• Rollover does not apply if you do not actively enroll in an FSA for 2023	No rollover permitted with DCSFA.

Dependent Care FSAs are optional accounts you can enroll in and are a great way to offset the cost of childcare or eldercare expenses! Contribute up to \$5,000 per year.

UNDERSTANDING THE

Family Medical Expense Reimbursement

All About the Family MERP

What is the Family MERP?

The Family MERP is an HRA plan that will provide associates that carry coverage elsewhere, 100% reimbursement for co-pays, co-insurance and deductibles. Associates may even be eligible to receive premium reimbursements.

How does this the Family MERP work?

Simple! You have/enroll in group coverage outside of Lower (typically with a spouse's employer) and enroll in the MERP. Once you complete enrollment with Catalize Health, you will then be eligible to submit expenses for reimbursement (psst..MERP Claim form is in Jostle under the HR Library).

What is covered by the MERP?

Anything that would be typically be covered under the company's plan with Cigna—doctor visits, prescription costs, urgent care visits, etc.

Who is eligible?

- Any associate that has access to alternate group coverage.

What are the specifics?

- Reimbursed for all eligible co-pays, co-insurance, and deductibles incurred through your alternate medical plan up to a max of \$8,700/single and \$17,400/family per year.
- Reimbursed for premium contributions paid for alternate coverage if it exceeds the premium contribution that you would have paid to remain on Lower's medical plan up to a max of \$200/single, \$400 Associate + Spouse or Children, \$600/family per month.
- If your spouse is currently enrolled in his/ her medical plan, you will be reimbursed for any increase in premium to add you and/or your dependents up to the above monthly maximums. If cost of alternate coverage is less than you would have paid for the Lower Medical Plan, you would not be eligible to receive a premium contribution reimbursement.

The Legal Stuff.

- The Family MERP Plan is a Health Reimbursement Account (HRA).
- You may be enrolled in an HRA or FSA, but you cannot be reimbursed from both the Family MERP and your HRA or FSA.
- All IRS rules and guidelines for Health Saving Accounts, Flex Spending Accounts, and Health Reimbursement Accounts apply to the administration of Lower's Family MERP plan.
- Associates are not eligible for the Family MERP if their alternate coverage is:
 - High Deductible Health Plan (HDHP) with active contributions to a Health Savings Account (HSA)
 - Medicare, Tricare, or Medicaid
 - Healthcare Exchange Policy made available through the Affordable Care Act
 - Individual policy
 - Limited Benefit Health Plan
- Any premium reimbursements due will be paid on the last regular payroll check each month and will be considered taxable income.

Dental Plans Provided by Cigna

Cigna Cost Per Paycheck	HMO Plan	PPO High Plan
Associate	\$6.95	\$12.67
Associate + Spouse/Domestic Partner	\$15.16	\$36.27
Associate + Child(ren)	\$15.29	\$36.67
Associate + Family	\$23.58	\$60.50
Deductibles		
Associate	None	\$50
Associate + Family	None	\$150
Coinsurance (What Lower pays once your hit your deductible)		
Preventive Care	Standard two cleanings typically covered 100% each year	100% - No Deductible
Basic	Not Applicable - Please refer to Patient Charge Schedule.	80%
Major*	Not Applicable - Please refer to Patient Charge Schedule.	50%
Orthodontia	Not Applicable - Please refer to Patient Charge Schedule.	50% (Dependent Children up to age 19 Only)
Maximums (The most that the plan will pay; after that, you pay 100% of the cost)		
Annual Maximum Benefit (Excludes preventive visits and orthodontia)	Not Covered	\$2,000 per person
Lifetime Orthodontia Maximum	Not Covered	\$1,000 per person

Note: If you use an out-of-network provider, you are responsible for any charges above the reasonable and customary limit.

CHOOSE MORE HEALTH BENEFITS

Vision Plans Provided by Cigna



Cigna Cost Per Paycheck	Vision Service Plan
Associate	\$2.47
Associate + Spouse/Domestic Partner	\$7.33
Associate + Child(ren)	\$8.45
Associate + Family	\$11.87

Copays	In-network	Out-of-network
Eye Exams (Every 12 months)	\$10 copay	Up to \$40
Eyeglass Lenses* (Every 12 months)	Included	\$30 Allowance
Eyeglass Frames** (Every 24 months)	Up to \$130	Up to \$70
Contact Lenses** (Every 12 months in place of frames and lenses)	Up to \$130	The plan reimburses up to \$105

Additional Benefits

Life and Accidental Death & Dismemberment (AD&D) Coverage Provided by Lower

Provides both Basic Life and AD&D coverage at a flat \$50,000 at no cost to you.

Voluntary Life and AD&D

Option to carry supplement coverage as outlined below:

Relation	Min	Max	Increments
Associate	\$10,000	500k or 5x Salary	\$10,000
Spouse	\$5,000	50% of associate vol life coverage	\$5,000
Child	\$10,000	\$10,000	N/A

An associate can raise their life insurance by \$20k during Open Enrollment with no additional medical questions, unless the increase will put them over the \$200k guarantee issue or the 3x salary limit.

Anything over those limits requires an EOI. An associate that would like to elect voluntary life insurance for either spouse or dependents, their voluntary life coverage must be at least 50% more. I.E. Associate elects \$50k in spouse VLI, that associate must have at least \$100k in VLI on themselves.





Disability Coverage

Long Term Disability

This benefit is provided to all full-time associate at no cost. This will provide associate with income protection to replace 60% of their monthly income (max of \$10,000 per month) after a 90 day elimination period. The maximum claim duration is Social Security Normal Retirement Age.

Short Term Disability

This benefit is a voluntary benefit offers to all full-time associates on a post-tax basis. Short-Term disability provides associates with income protection that will replace 60% of their weekly earnings (max of \$1,000 per week). If you experience an injury, there is no waiting period. If you experience an illness, there is a 7 day waiting period. The maximum claim duration is 13 weeks.

OTHER PERKS

Just for you!

Real Support, for Real Life

Our Employee Assistance Program (EAP), is provided by Cigna and offers a multitude of services that help you with life situations any time, any day. With this service, you've got access to coaches, counselors, and online programs to help with your day-to-day life needs. They are available face-to-face, by phone, and video. Available 24/7.





Yearly Holidays
 New Year's Day, Martin Luther King Jr. Day,
 Memorial Day, Juneteenth, Independence
 Day, Labor Day, Thanksgiving, Christmas

Parental Leave

Lower will provide up to eight weeks of paid parental leave to associates following the birth of an associate's child. To be eligible, an associate must have been employed with Lower for at least 12 consecutive months, works at least 1,250 hours during those 12 consecutive months, be a full or part time associate. Parental leave is compensated at 60% of associate's gross wages for the prior calendar year.

PTO

Paid time off schedule is for full-time, non-Outside Sales Team members. Part-time PTO schedule can be found on Lower's company intranet. Team Members may take or borrow up to 40 hours of PTO before it is accrued with their manager's prior approval.

Years of Employment:	Upon Hire Through Second Year	Third to Nine Years	Ten Years or More
Hours Accrued Per Pay Period:	5	6.67	8.33
Days:	15	20	25
Accrual Cap (Days):	22.5	30	37.5

INFORMATION

Contact

Please contact benefits@lower.com with any benefit questions!

Cigna

Medical, Dental & Vision

myCigna.com or the myCigna app available for download in app store and google play.

Nurse Hotline: Available 24/7 for you to call in and speak with a registered nurse about basic health-related questions. 1-800-244-6224

Member/RX services:
1-800-244-6224

J&K Consultants, Inc.

Family MERP

Address: 2605 Nicholson Road, Suite 1140, Sewickley, PA 15143

Phone: 877-872-4232

Email: merp@jandkcons.com

Fax: 877-599-3724

To submit claims, send the Family MERP Claim Form, available on Jostle, along with copies of receipts, EOB, and any other relevant claim documentations to the above.

Cigna Employee Assistance Program

Real Support for Real Life

Just when you think you have it figured out, along comes a challenge. Whether the challenge be large or small, your EAP is available to assist. Your EAP resources include counseling sessions, legal consultation, financial planning, parenting resources and more.

Phone: 877-622-4327 or log in to myCigna.com, select the EAP link under coverage and use our employer code "Lower" to access resources today.